



THORNLEA SECONDARY SCHOOL

School Start-Up Package **FORMS**

**Return these completed forms to
your child's homeroom teacher or school office by
September 21, 2018**

***Inspire* Learning!**



Forms Checklist

In this package you will find the following forms to review and sign.

Return the completed forms to your child's homeroom teacher by September 21, 2018.

Required Forms

These forms must be completed.

- School Start-Up Permissions Form
- Policy Agreement
- Caring & Safe Schools Agreement
- Information Technology Acceptable Use Agreement
- Student Information Consent Form

Additional Forms

These programs or opportunities are optional. These forms must be completed **only** if you or your child wish to participate.

- Media Consent Form
- Faith Request for Curriculum Accommodations Form
- School Council Nomination Form
- Student Accident Insurance Enrolment Form (distributed separately by homeroom teacher)
- Volunteers in Our Schools



Student name _____
 Homeroom teacher _____
 Grade _____

SCHOOL START-UP PERMISSIONS FORM – SECONDARY

Parents/guardians of students under 18 or students over 18, read and initial each item and sign the bottom of the form to acknowledge that you understand and will follow the school and Board policies.

	Initial
<p>Allergies/Medical Conditions: We understand that there are students and staff within our school community who have life-threatening allergies, and agree to practice allergy safe measures.</p> <p><i>Inform the school office if your child has a serious or life-threatening allergy or medical condition.</i></p>	
<p>Code of Student Conduct: We understand that students are expected to follow the School Code of Student Conduct in the School Start-Up Package, on school property and during Board or school-sponsored events and activities.</p>	
<p>Lockers: We understand that students who are provided with lockers must abide by the guidelines for locker usage. Lockers are Board property and may be opened at any time as required.</p>	
<p>School Policies: We have reviewed the school policies in the School Start-Up Package and agree to adhere to them: Dress Code, Safe Arrival and Departure</p>	
<p>Tobacco/Alcohol/Drug-Free Environment: We understand the use of tobacco, and/or student possession of alcohol/illicit drugs are prohibited on school property and that this also applies during Board or school-sponsored events and activities.</p>	
<p>Use of Non-Board Electronic Devices: We understand the school policy on portable electronic devices outlined in the School Start-Up Package and in the Guide to the School Year and agree to adhere to the policy.</p>	

Absenteeism

The safety of our students is important to us. Let us know if you are planning an absence for your child during the year (family obligations/vacation/faith day, etc.) by indicating the date and reason below.

Date	Reason

Parent/Guardian name (print): _____
Parent/Guardian signature: _____
Student Signature (if over 18): _____
Date: _____

Personal information collected pursuant to the Education Act as amended will be used to provide access to student records as described. Please contact the Information Access and Privacy Office if more information is needed (905-727-0022 ext. 2015).
File: LEG-Consents March 2017
Retain: 12 months from date signed in the school office.



Student name _____
Homeroom teacher _____
Grade _____

POLICY AGREEMENT FORM – SECONDARY

Parents/guardians and students must sign to acknowledge that both understand and will follow these Board policies.

Check this box if student is 18 years of age or older. Students over 18 do not need parent/guardian signature.

The Caring and Safe Schools Policy

Summary found in the Guide to the School Year under Caring and Safe Schools
Full policy is available on the Board website:
<http://www.yrdsb.ca/AboutUs/Policy/Pages/default.aspx>

The Use of Technology Agreement

Found in the Guide to the School Year under Technology Use
Also available on the Board website:
<http://www.yrdsb.ca/Programs/SafeSchools/Documents/InformationTechnology-AUAgreement.pdf>

The Student Transportation Policy

Eligibility and other information is found in the Guide to the School Year under Busing (Transportation)
Full policy is available on the Board website:
<http://www.yrdsb.ca/AboutUs/Policy/Pages/default.aspx>

The Student Personal Information section

Found in the Guide to the School Year under Student Personal Information. If you have concerns about the use of your child's personal information, please contact your school.

Student Signature: _____
Parent/Guardian name (print): _____
Parent/Guardian signature: _____
Date: _____

Personal information is collected under the authority of the Education Act as amended, and will be used to manage the disclosure of individual personal information. Contact the school principal for more information.

File: LEG-Consents

Valid for 12 months after date of last use/application



CARING & SAFE SCHOOLS AGREEMENT

Student(PRINT):
Last Name: _____ First Name: _____
Homeroom Teacher: _____
Grade _____

Please check this box if student is 18 years of age or older.

All students and their parents/guardians must sign this form to acknowledge in writing that they have read, understood and abide by:

- The Caring and Safe Schools Policy (*found in the Guide to the School Year and on the YRDSB website <http://www.yrdsb.edu.on.ca/page.cfm?id=TP0000002&sn=T>*).

Primary Students

We have read, talked about and will abide by:

- The Caring and Safe Schools Policy (*found in the Guide to the School Year and on the YRDSB website <http://www.yrdsb.edu.on.ca/page.cfm?id=TP0000002&sn=T>*).

Parent/Guardian

Signature: _____

Date: _____

Junior/Intermediate/Senior Students

We have read, understand and will abide by:

- The Caring and Safe Schools Policy (*found in the Guide to the School Year and on the YRDSB website <http://www.yrdsb.edu.on.ca/page.cfm?id=TP0000002&sn=T>*).

Student Signature: _____

Parent/Guardian
Signature: _____

Date: _____



INFORMATION TECHNOLOGY ACCEPTABLE USE AGREEMENT

Student(PRINT):
Last Name: _____ First Name: _____
Homeroom Teacher: _____
Grade _____

Please check this box if student is 18 years of age or older.

All students and their parents/guardians must sign this form to acknowledge in writing that they have read, understood and abide by:

- The Information Technology Acceptable Use Agreement (*found in the Guide to the School Year and on the YRDSB website <http://www.yrdsb.edu.on.ca/pdfs/a/depts/curriculum/InformationTechnology-AUAgreement.pdf>*).

Primary Students

We have read, talked about and will abide by:

- The Information Technology Acceptable Use Agreement (*found in the Guide to the School Year and on the YRDSB website <http://www.yrdsb.edu.on.ca/pdfs/a/depts/curriculum/InformationTechnology-AUAgreement.pdf>*).

Parent/Guardian
Signature: _____
Date: _____

Junior/Intermediate/Senior Students

We have read, understand and will abide by:

- The Information Technology Acceptable Use Agreement (*found in the Guide to the School Year and on the YRDSB website <http://www.yrdsb.edu.on.ca/pdfs/a/depts/curriculum/InformationTechnology-AUAgreement.pdf>*).

Student Signature: _____
Parent/Guardian
Signature: _____
Date: _____

Personal information is collected under the authority of the Education Act as amended, and will be used to manage the disclosure of individual personal information. Contact the school principal for more information.

File: LEG-Consents

Valid for 12 months after date of last use/application



Student name _____

Teacher _____

Grade _____

STUDENT INFORMATION CONSENT FORM

Schools routinely collect, use and disclose student personal information in keeping with the Education Act and other laws. All activities, programs and technologies that collect, use or disclose student personal information are assessed to ensure student privacy is protected.

Please indicate your consent by checking the appropriate box:

	I consent	I do not consent
Share your child's name, grade, achievements and photographs of the student in the school yearbook. Individual grades or marks will not be posted.		
Share your child's achievements and photographs in our school newsletter, website and through official YRDSB and school social media accounts. Your child's first name and grade may be referred to. Individual grades or marks will not be posted.		
Have commercial photographers take class and individual photographs.		
Use student information to administer events such as commencement, assemblies and science fairs.		
Have your child recorded or photographed by a YRDSB staff member, volunteer or student teacher for the purpose of a learning program or teaching materials. These photos and videos may be used within the school or board.		
Have your child participate in video conferencing for the purpose of learning.		
Have your child photographed or recorded by media for stories throughout the school year. Where your child may be individually interviewed by members of the media, specific permission will be sought.		
Have my child photographed or recorded by media and/or individually interviewed related to their participation in extracurricular activities.		

This consent is valid for one school year. Consent may be revoked at any time by contacting the school office. Please contact the school if you have any questions.

I, being the parent/legal guardian of the student named above, an adult student or an adult participant, have read and understand the information provided on this form. I consent to the use and subsequent use of student information as outlined above.

Parent/Guardian Name (print): _____

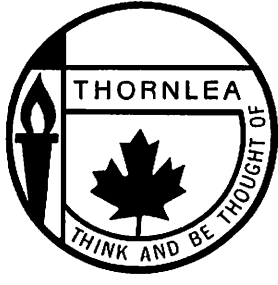
Parent/Guardian Signature: _____

Date: _____

Personal information is collected under the authority of the Education Act and will be used to manage the disclosure of student information. Contact the school principal for more information.

FILE: LEG -Consents or OSR or HUM-Employee File. Valid for 12 months from date of last use/application

Media Consent Form



School Year 2018/2019

Dear Parents/Guardians:

Student photographs, video-taped images and activities, voice recordings, artwork, writing or other school work may be recorded, displayed or used in board and school specific internet web pages for documentation and presentation purposes of the York Region District School Board.

I/We the undersigned, consent to the use of the above noted records and images by the York Region District School Board for the individual named below:

Please print:

Student Last Name _____ First Name _____

Student Number _____ - _____ - _____ Grade: _____

Homeroom Teacher Name _____

Name of Parent/Guardian/Adult Student: _____

Signature of Consent of above noted Parent/Guardian/Adult Student

Signature: _____ Date: _____

As of January 1, 1991, the York Region District School Board became subject to the Municipal Freedom of Information and Protection of Privacy Act (FOI/POP). The purpose of this consent form is to protect the privacy of individuals and to ensure that personal information is shared properly.

Please return completed and signed form via:
Student's homeroom teacher *or*
Email thornlea.ss@yrdsb.ca *or*
Fax 905-889-2991



Student (PRINT): _____

Family Contact Phone No.: _____

Teacher (PRINT): _____ Grade: _____

FAITH REQUEST FOR CURRICULUM ACCOMMODATIONS FORM

Students and families may request accommodation(s) for religious beliefs and faith-based practices using this form.

The York Region District School board is committed to ensuring an equitable and inclusive learning environment that promotes student achievement and well-being. The board supports parents with faith requests for accommodations. This process begins with a dialogue with the teacher and a school administrator which may or may not lead to accommodations, including exemption from components of the curriculum. Accommodations will be considered on a case-by-case basis.

Please use the space below to explain the nature of your request.

Please state the aspects of the curriculum for which you are requesting accommodations for your child and the rationale for the request.

Curriculum expectations may be found at the Ministry Website:

<http://www.edu.gov.on.ca/eng/curriculum/elementary>

Guidelines for Program Accommodations for Faith purposes:

<http://www.yrdsb.ca/Programs/equity/Documents/ReligiousAccommodation.pdf>

Aspects of Curriculum:

Rationale for the Request:

Your child's teacher and/or school administrator may invite you to discuss and gather more information about your request.

Parent/Guardian Name
(PRINT) _____

Parent/Guardian
Signature _____

Date _____

Student Signature
(if applicable) _____

Date _____



Student (PRINT) _____

Teacher (PRINT) _____

Grade _____

SCHOOL COUNCIL CANDIDATE NOMINATION FORM

Please complete Part A or Part B

Part A: I am declaring my candidacy:

- I wish to declare my candidacy for an elected position as a parent/guardian representative on the school council:

I am the parent/guardian of _____ who is currently
(*print name of student*)
registered in Grade _____.

I am an employee of York Region District School Board. Yes No

Name _____

Address: _____

Home Phone: _____ Business Phone _____

Email: _____

Part B: I am nominating a candidate

- I wish to nominate _____ for an elected position as a parent/guardian representative on the school council.

_____ is the parent/guardian of _____
(*print name of nominee*) (*print name of student*)

who is currently registered in Grade _____.

The person I have nominated is an employee of York Region District School Board. Yes No

Name _____

Address: _____

Home Phone: _____ Business Phone _____

Email: _____

Nominator's Signature: _____ Date _____

Please include a brief (4-5 sentences) biography of the candidate on the back of this form.

Personal information is collected under the authority of the Education Act as amended, and will be used to manage the disclosure of individual personal information. Contact the school principal for more information.

File: ADM-School Councils

Valid for 12 months after date of last use/application



VOLUNTEERS IN OUR SCHOOLS

All volunteers are required to comply with the York Region District School Board Policy and Procedure #280 *Volunteers in Our Schools*. You are required to:

- Submit a Police Vulnerable Sector Check (PVSC) completed within the last six months (requirement for new volunteers) OR sign the Annual Offence Declaration (returning volunteers), and
- Sign a Confidentiality Agreement.

These documents will be retained at the school.

Please review the volunteer opportunities outlined below and select those areas in which you would like to become involved. We will contact you.

Transportation:

Upon submission of a Trip Driver Authorization Form (NP679-02), assist with the transportation of students to and from school events.

Student Lunches:

Assist with the distribution of student lunches to students.

Fundraising:

Assist School Council Fundraising Representative with fundraising projects during the school year.

Volunteer Reading Program:

Work with students mostly in the primary grades to help them with their reading.

School Library:

Working under the direction of our librarian, assist in the library in a clerical capacity.

Classroom Support:

Various work under the direction of a teacher.

Other:

Student Name (if applicable)

Teacher Name (if applicable)

Volunteer Name (PRINT)

Phone Number (Day Time)

Email

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